

Transcript of the Testimony of

Dr. Robert Lacy

Date:

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Eddie Spiller v. Jeffrey Stieve

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1 that should all go on the 407 and, you know, in one case
2 it may be that I think somebody has an ACL tear and their
3 anterior drawer test is, you know, I can push the knee and
4 it's unstable, you know, that we would actually probably
5 want them to get an MRI first and then go see the
6 specialist because the specialist most of the times
7 will -- they'll do the visit and they'll ask for an MRI,
8 then we'll get the MRI and have to send the visit -- the
9 person back. So, you know, depending on -- it depends on
10 what it is.

11 Q. (By Mr. Altman) I understand that, but I am not talking
12 about the details. You still train these doctors to
13 properly -- I think you said fill out a 407 request,
14 right?

15 A. We tell them what we are looking for in a 407 request,
16 yes.

17 Q. And isn't your presumption that your doctors listen to
18 you?

19 A. It is.

20 Q. And that if a doctor fills out a 407 that because you
21 trained them, they know the criteria to put on a 407?

22 MS. VAN THOMME: Object to form and foundation.

23 THE WITNESS: It is and we track to see -- we track
24 to see what percentages people are getting of approvals
25 and denials, because we want people to achieve something

1 like a 90 -- 90 percent approval rate, so if they are
2 getting, like, a 50 percent approval rate, then they are
3 not doing something right. Either they are not filling it
4 out right with the information that we need or they are
5 asking for too many things that are just, you know,
6 unnecessary, they are not doing the steps that could be
7 done in the right order, so in that case, we would go back
8 and try to retrain that person.

9 Q. (By Mr. Altman) Is it also possible that Corizon has been
10 unreasonably denying 407s?

11 MS. VAN THOMME: Object to form.

12 THE WITNESS: I don't think so.

13 Q. (By Mr. Altman) How do you know?

14 A. Because the alternative treatment plans that I've seen
15 most of the time, I agree with them.

16 Q. Do you think it's appropriate to send a -- to send a
17 person for physical therapy, for a non-orthopedist to
18 decide to send a person for physical therapy without an
19 orthopedist approving that physical therapy?

20 MS. VAN THOMME: Object to form and foundation.

21 Q. (By Mr. Altman) Let me take a step back.

22 A. I think --

23 Q. Hold on. Hold on. There's a big difference --

24 A. I'd like to answer that question.

25 Q. No, I'm withdrawing that. There's a big difference